Understanding Behavioral Health Recovery

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Objectives

- Define Behavioral Health Recovery
- Present the "5 Stages of Recovery"
- Discuss the ten guiding principles of behavioral health recovery

What is Behavioral Health?

Behavioral Health encompasses:

- Mental Health Disorders
- Substance Use Disorders
- Co-occurring Disorders

Usually associated with distress or disability in social, occupational, or other important activities.

Parallels Between Mental Health & Substance Use Disorders

- Both have biological, psychological and social components
- Both create shame and guilt
- Both are stigmatized by society
- Both are progressive
- Both are chronic
- Both are no fault illnesses
- People can and do recover from both

Behavioral Health Continuum

Mental Health Disorders

Co-occurring Disorders

Substance Use Disorders

- All need hope to recover.
- •All want to manage or eliminate symptoms.
- •All want valued social roles & relationships.
- •All want purpose and meaning in their lives.
- •All want to make a worthwhile contribution to their communities. Davidson & White, 2010, Recovery in Mental Health and Addiction

What does it mean to RECOVER from a Behavioral Health Issue?

Recovery is:

A process of regaining one's life to a usable form; reclaiming one's personal power from one's illness.



Adapted from Webster's II

by: Molly Clouse
June 2002

Achieving the Promise:

TRANSFORMING
MENTAL HEALTH CARE
IN AMERICA

In July 2003, The President's New Freedom Commission on Mental Illness "Achieving the Promise: Transforming Mental Health Care in America" defined Recovery as:

the process in which people are able to <u>live</u>, <u>work</u>, <u>learn</u>, and <u>participate fully in their</u> communities.

FINAL REPORT

JULY 2003

Before 2010, Substance Abuse Mental Health Services Administration, SAMHSA, had separate definitions for recovery from mental disorders and substance use disorders.

In August 2010, leaders in the behavioral health field, consisting of people in recovery from mental health and substance use problems and SAMHSA, met to explore the development of a common, unified working definition of recovery.

Definition of Recovery SAMHSA Working Definition

Substance Abuse Mental Health Services Administration

Recovery is a process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential.

Dimensions that Support Recovery

Health

Home

Purpose

Community

Health

Overcoming or managing one's disease(s) and making informed, healthy choices that support physical and emotional wellbeing.

Home

A stable and safe place to live

Purpose

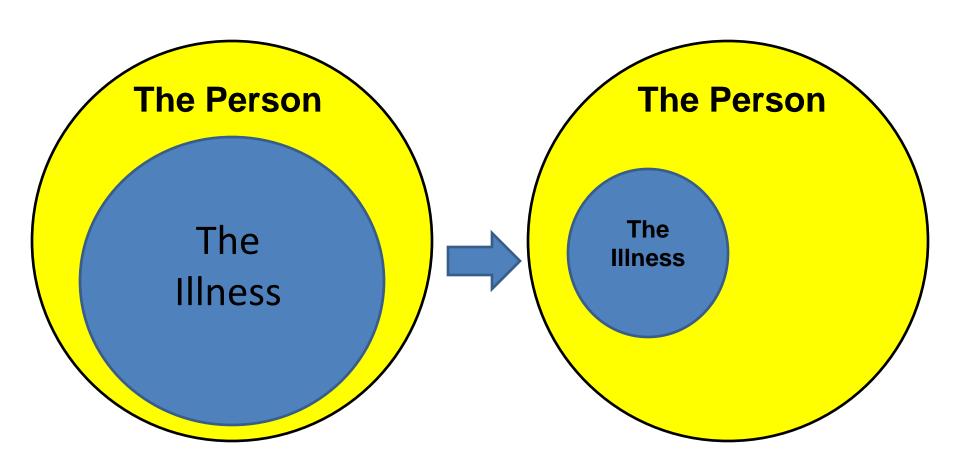
Meaningful daily activities, such as a job, school, volunteerism, or creative endeavors, and

the independence, income and resources to participate in society

Community

Relationships and social networks that provide support, friendship, love, and hope

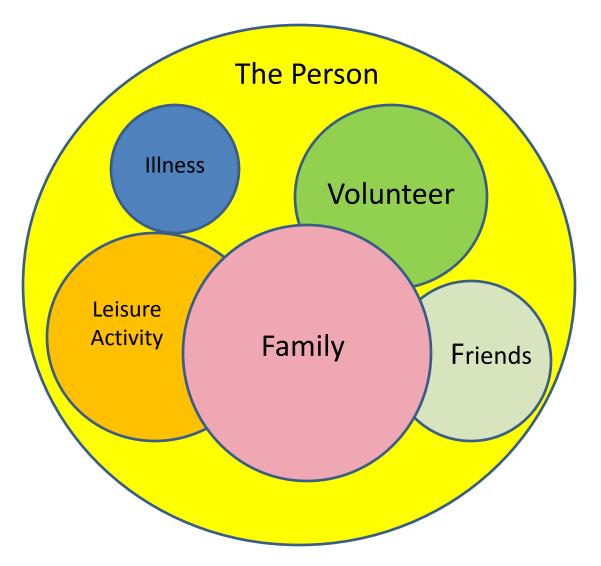
Process of Recovery



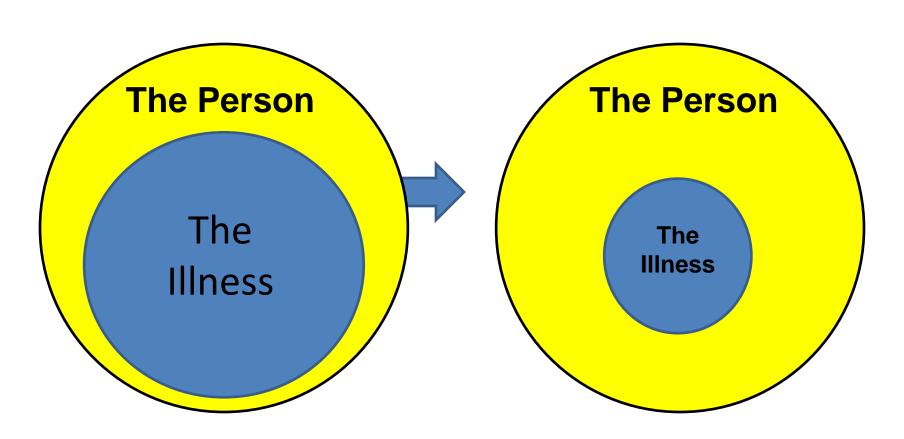
Recovery = A Broad Life where the illness is NOT dominant...

The Person Illness **Employment** Leisure **Activity** Friends **Family**

Everyone's Recovery is different!



To make this transition we need Recovery-Oriented Services



Recovery-Oriented Services are person-centered, strength-based services that help individuals improve their health and wellness, live a self-directed life and strive to reach their full potentials.

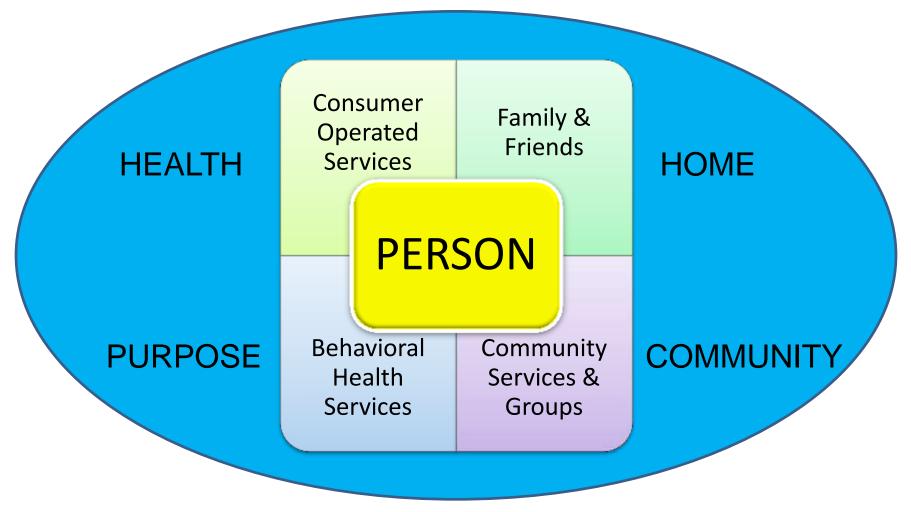
What makes Recovery-Oriented Services different from Traditional Services?

- ROS don't change what the programs are, but, the way individuals interact with and within the programs do change.
- ROS are person-centered approaches to meeting the needs identified by the individual.
- ROS change the role individuals play in their own recoveries.

Traditional System Swaddles Patient with Services



A Recovery-Oriented System *Supports* but Does Not Surround the Individual



The Illness Centered Model

Professional Role

- Hierarchical
- Paternal
- In-charge
- Holds the important knowledge
- Responsible for treatment
- Disease is focus

Patient's Role

- Subservient
- Obedient
- Passive
- Recipient of knowledge
- Responsible for following treatment
- Host of the disease

ROS: Person Centered Model

Person's Role

- Personal power
- Personal knowledge
- Personal responsibility
- Person in context of life is the focus
- Person is selfdetermining

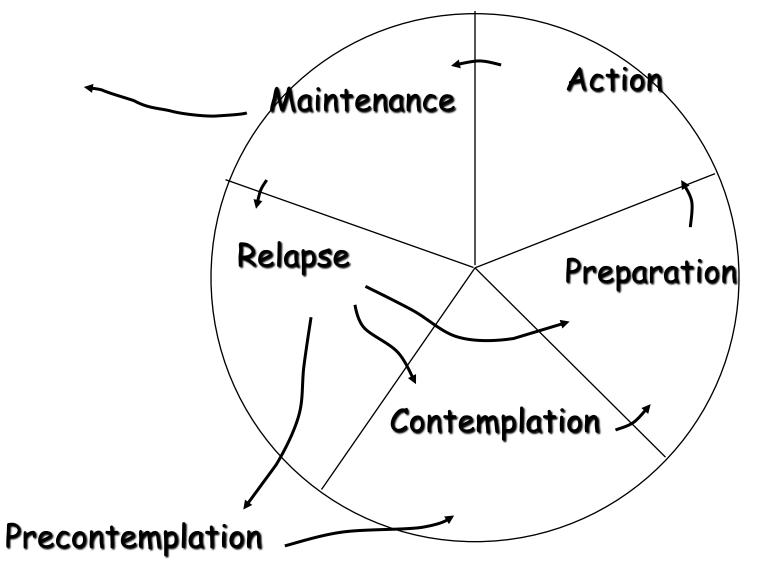
Professional Role

- Power sharing
- Exchange information
- Shared decision-making
- Co-investigator
- Professional is expert consultant on journey

Having access to **Recovery-Oriented Services** allows individuals to move through the 5 Stages of Recovery more successfully!

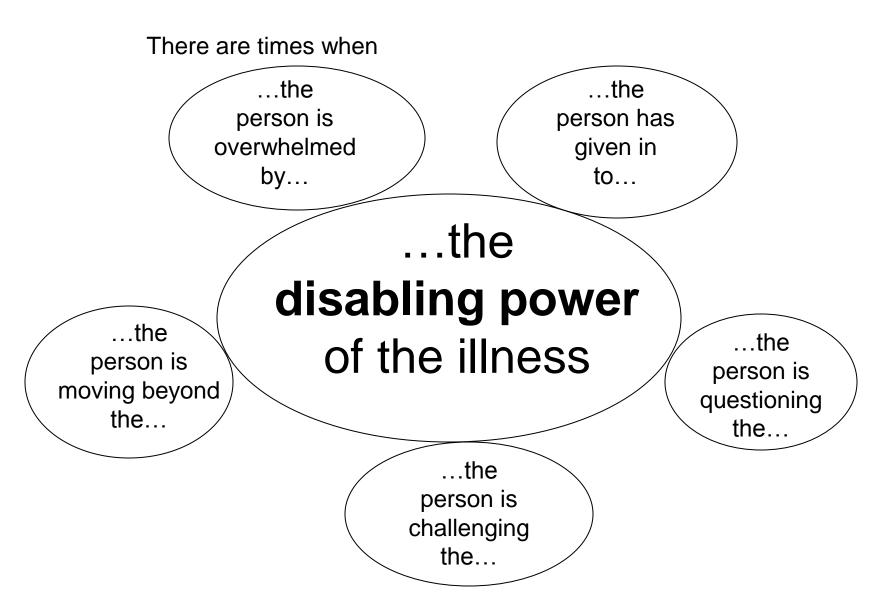
Stages in the Recovery Process

Stages of Change



Prochaska & DiClemente Late 70's - early 80's

FIVE STAGES OF THE RECOVERY PROCESS



Five Stages in the Recovery Process

Appalachian Consulting Group, Inc. (with quotations from Patricia Deegan)

Impact of Illness



"The shattering of one's world, hopes and dreams."

The person is **overwhelmed by**

the disabling power of the illness. The impact of the illness is the dominant experience in a person's life and the person is having difficulty functioning.

The <u>danger</u> is that the person will re-define <u>identity</u> in mental illness terminology that will automatically limit her future.

The <u>role of services</u> is to decrease the emotional distress by reducing the symptoms and communicate that there is life after diagnosis.

Life is Limited



"We both gave up. Giving up was a solution."

The person has **given into**

the disabling power
of the illness. He doesn't like
the way his life is, but believes
that this is the best he will ever
be. He is not ready/able to make
a commitment to change

The <u>danger</u> is that the person will have identified so strongly with the negative stigma of the illness that he cannot see any <u>possibility</u>.

The <u>role of services</u> is to instill hope, a sense of possibility, and to rebuild a positive self-image.

Change is Possible



"The fragile flame of hope and courage."

The person is **questioning**

the disabling power
of the illness. She believes that
there may to be more to life than
she is currently experiencing and
is beginning to believe her life
can be different.

The <u>danger</u> is that she will be afraid to take the necessary <u>risks</u>, or be discouraged to do so, and remain in the 'life is limited' stage.

The <u>role of services</u> is to help her see that she is not so limited by the illness and in order to move on she will need to take some risks.

Commitment to Change



"I began in little ways with small triumphs and simple acts of courage."

The person is **challenging**

the disabling power of the illness. He believes that there are some possibilities, but he is not sure what they are. He is willing to explore what it will take to make some changes.

The <u>danger</u> is that he will not get the skills, resources and <u>supports</u> that he needs to do what he wants to do and will become frustrated and give up.

The <u>role of services</u> is to help the person take the initial steps by helping him identify his strengths and needs in terms of skills, resources and supports.

Actions for Change



"We rebuilt our lives on three corner stones of recovery hope, willingness and responsible action."

The person is **moving beyond**

the disabling power of the illness. She knows the direction she wants to go, but is not sure that she can do it. Yet she is willing to begin to take more responsibility for her life.

The <u>danger</u> is that she will begin to doubt her ability to function on her own and to take <u>responsibility</u> for her own actions.

The role of services is to equip her with the necessary skills, resources and supports so that she can trust in her own decision-making ability and take more responsibility for her life.

Providers are needed

Impact of Illness
Person is
overwhelmed by the
disabling power of
the illness.

Task is to decrease the emotional distress by reducing the symptoms.

Life is Limited
Person has given in to
the disabling power of
the illness.

Task is to instill hope, a sense of possibility, and to rebuild a positive selfimage.

Change is Possible Person is questioning the disabling power of the illness.

Task is to empower the person to participate in his own recovery by beginning to take small steps.

Commitment to
Change
Person is questioning
the disabling power of
the illness.

Task is to help the person identify her strengths and needs in terms of skills, resources and supports.

Actions for
Change
Person is moving
beyond the
disabling power of
the illness.

Task is to help the person use his strengths and get the necessary skills, resources and supports.

in every stage!

What's needed is different

Impact of Illness

The task is to decrease the emotional distress by reducing the symptoms.

Life is Limited

The task is to instill hope, a sense of possibility, and to rebuild a positive self-image.

Change is Possible

The task is to empower the person to participate in his own recovery by beginning to take small steps.

Commitment to Change

The task is to help the person identify her strengths and needs in terms of skills, resources and supports.

Actions for Change

The task is to help the person use his strengths and get the necessary skills, resources and supports.

in every stage.

Treatment and Rehabilitation

- The purpose of Treatment Services is to decrease emotional distress by reducing symptoms. (diagnosis, detox, medication, Residential/In-House treatment, psychotherapy)
- The purpose of **Rehabilitation** is to provide skills and supports that facilitate recovery. (goal setting, skills teaching, resource coordination, supports development)

BOTH ARE NEEDED

Recovery Model

Integrates Treatment and Rehabilitation Services within the Stages of Recovery

Rehabilitation Services

Needed to recover from Disabling Power of the Illness.

(Color gradation represents the level of services needed to maintain symptom relief.)

Impact of Illness	Life is Limited	Change is Possible	Commitment to Change	Actions for Change
illness. The impact of the illness is the dominant experience in a person's life and the person is often	l '	The person is questioning the disabling power of the illness. She believes that there has to be more to life than she is currently experiencing and is beginning to believe that his life can be different.	The person is challenging the disabling power of the illness. He believes there are possibilities for him but, he is not sure what they are or what to do. He is willing to explore what it will take to make some changes	The person is moving beyond the disabling power of the illness. She has decided on the direction she wants her life to go, but is not sure what to do. Yet she is willing to take responsibility for his actions.
The task is to de- crease the emo- tional distress by reducing the symp- toms.	The task is to instill hope, a sense of possibility, and to rebuild a positive self-image.	The task is to empower the person to participate in his own recovery by beginning to take small steps.	The task is to help the person identify her strengths and needs in terms of skills, resources and supports.	The task is to help the person use his strengths and get the necessary skills, resources and sup- ports.

Treatment Services

Needed to reduce symptoms and maintain symptom relief.

(Color gradation represents the level of services needed to maintain symptom relief.)

Where Does Case Management Fit In?

Kentucky defines case management as:

 A practice in which the service recipient is a partner, to the greatest extent possible, in assessing needs, obtaining services, treatments and supports, and in preventing and managing crisis.

Where Does Case Management Fit In?

 The focus of the partnership is recovery and self management. The individual and the practitioner plan, coordinate, monitor, adjust and advocate for services and supports directed toward the achievement of the individual's personal goals for community living.

National Association of Case Management

Impact of Illness	Life is Limited	Change is Possible	Commitment to Change	Action for Change
The person is overwhelmed by the disabling power of the illness. The impact of the illness is the dominant experience in a person's life and the person is having difficulty functioning.	The person has given into the disabling power of the illness. They don't like the way his life is, but believe that this is the best they will ever be. They are not ready/able to make a commitment to change	The person is questioning the disabling power of the illness. The person believes that there may to be more to life than they are currently experiencing and are beginning to believe life can be different.	The person is challenging the disabling power of the illness. they believes that there are some possibilities, but is not sure what they are. They are willing to explore what it will take to make some changes.	The person is moving beyond the disabling power of the illness. They know the direction they want to go, but aren't sure they can do it. Yet they are willing to begin to take more responsibility for their life.
The <u>danger</u> is the person will see themselves as the <u>illness</u> and will live out of an "illness or disability" story.	The <u>danger</u> is that the person believes that there is <u>nothing</u> they can do to make life better, so they turn their lives over to the system.	The <u>danger</u> is that they may see some possibility, but are unwilling to take risks for fear of failure or relapse.	The danger is that he will not get the skills, resources and supports that he needs to do what he wants to do and will become frustrated and give up.	The danger is that they will begin to doubt their ability to function and not have what they need to get necessary skills, resources, and supports.
The role of the case manager is to listen to the person and encourage them to get treatment. Convey that you believe treatment helps and they can recover.	The role of the case manager is to explore the person's interests, hopes, dreams and experience with employment. Share some success stories.	The role of the case manager is to encourage and celebrate small steps. Listen to what the person wants to do and support small steps in that direction. Follow up on each hope and dream.	The role of the case manager is to assist with initial planning and resource development and celebrating each success. Remind the person of their unique strengths often.	The role of the case manager is to assist with the resources and supports necessary for recovery and community integration.

10 Guiding Principles of Recovery

Hope Person-Driven Many Pathways Holistic Peer Support Relational Culture Addresses Trauma Strengths/Responsibility Respect

Recovery emerges from hope.

Hope is the catalyst of the recovery process.

Recovery is person-driven.

Self-determination and selfdirection are the foundations for recovery as individuals define their own life goals and design their unique path(s) towards those goals.

Recovery occurs via many pathways. Recovery is built on the multiple capacities, strengths, talents, coping abilities, resources, and inherent value of each individual. Recovery pathways are highly personalized.

Recovery is holistic. Recovery encompasses an individual's whole life, including mind, body, spirit, and community.

Recovery is supported by peers and allies. Mutual support and mutual aid groups, including the sharing of experiential knowledge and skills, as well as social learning, play an invaluable role in recovery.

Recovery is supported through relationship and social networks. An important factor in the recovery process is the presence and involvement of people who believe in the person's ability to recover; who offer hope, support, and encouragement; and who also suggest strategies and resources for change.

Recovery is culturally-based and influenced. Culture and cultural background in all of its diverse representations—including values, traditions, and beliefs—are keys in determining a person's journey and unique pathway to recovery. Services should be culturally grounded, attuned, sensitive, congruent, and competent, as well as personalized to meet each individual's unique needs.

Recovery is supported by addressing trauma.

The experience of trauma (such as physical or sexual abuse, domestic violence, war, disaster, and others) is often a precursor to or associated with alcohol and drug use, mental health problems, and related issues. Services and supports should be trauma-informed to foster safety (physical and emotional) and trust, as well as promote choice, empowerment, and collaboration.

ASK: "What happened to you?" not "What's wrong with you?"

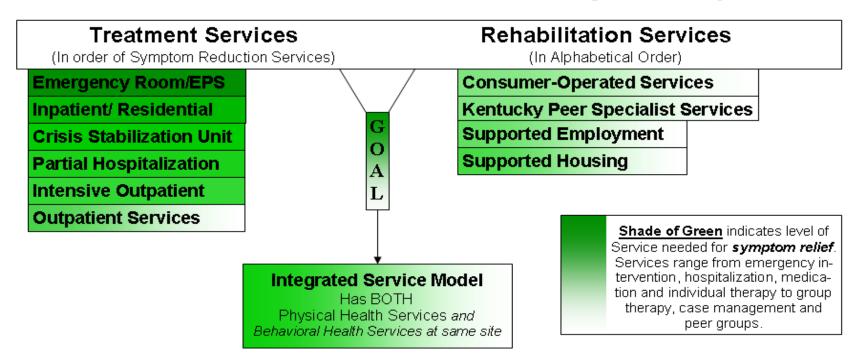
Recovery involves individual, family, and community strengths and responsibility

Individuals, families, and communities have strengths and resources that serve as a foundation for recovery. In addition, individuals have a personal responsibility for their own self-care and journeys of recovery.

Recovery is based on respect Community, systems, and societal acceptance and appreciation for people affected by mental health and substance use problems—including protecting their rights and eliminating discrimination—are crucial in achieving recovery.

Systematized Recovery

Treatment and Rehabilitation Services within the 5 Stages of Recovery



Impact of Illness	Life is Limited	Change is Possible	Commitment to Change	Actions for Change
	Person has given in to the disabling power of the illness.	. c.ccii c quiccui iii g aic	Person is questioning the disabling power of the illness.	Person is moving be- yond the disabling power of the illness.
	Task is to instill hope, a sense of possibility, and to rebuild a positive self-image.		Task is to help the person identify her strengths and needs in terms of skills, re- sources and supports.	Task is to help the person use his strengths and get the necessary skills, resources and supports.

Thank You!

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